Fill in this information t	to identify your case:	
Debtor 1	Bryan T Maloney	_
Debtor 2 (Spouse, if filing)	Cindy G Maloney	_
United States Bankrup	otcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	_
Case number (If known)	-10738	Check if this is: ■ An amended filing □ A supplement showing postpetition chapter
Official Form	1061	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

If you have more than one job, attach a separate page with information about additional employers. Employed	ii iioii-iiiiig spouse			
attach a separate page with information about additional employers. Occupation Production Supervisor Billing	Debtor 2 or non-filing spouse			
information about additional employers. Occupation Include part-time, seasonal, or	ed			
Occupation Production Supervisor Billing Include part-time, seasonal, or	☐ Not employed			
Francis				
• •	Feastivities Inc			
or homemaker, if it applies	440 Domino Lane Philadelphia, PA 19128			

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 5,768.00 \$ 1,750.67

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 1061 Schedule I: Your Income page 1

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Deb Deb	tor 1 tor 2	Bryan T Maloney Cindy G Maloney		(Case	number (if known)	_1	6-10738		
	Con	y line 4 here	4.		For	Debtor 1 5,768.00		For Debtor non-filing s		
	906	y line 4 nere			_	3,700.00	•	Ť <u>I,</u>	1 30.01	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5а		\$_	1,642.13			331.74	
	5b.	Mandatory contributions for retirement plans	5b		\$_	68.68		\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.		\$_	128.42	-	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d		\$_ \$	0.00		\$	0.00	
	5e. 5f.	Insurance Domestic support obligations	5e 5f.		\$ \$	408.71 0.00		\$ 	0.00	
	5g.	Union dues	5g		\$ -	0.00		\$	0.00	
	5h.	Other deductions. Specify: United Way	5h		\$_	4.33		\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	2,252.27	-	\$	331.74	
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,515.73	-	\$ 1,	418.93	
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0.00	-		200.00	
	8b.	Interest and dividends	8b		\$-	0.00		\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$ \$	0.00	-	\$	0.00	
	8d.	Unemployment compensation	8d	١.	\$	0.00	-	\$	0.00	
	8e.	Social Security	8e	٠.	\$	0.00	-	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	-	\$	0.00	
	8g.	Pension or retirement income	 8g	١.	\$	0.00	-	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h	.+	\$_	0.00	+	\$	0.00	
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.		9.	5	\$	0.00		\$1	,200.00)
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$		3,515.73 + \$		2,618.93	= \$	6,134.66
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				9,010110			_	0,101.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your or friends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not accify:	depe				,			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							\$Combin	6,134.66
13	Dov	you expect an increase or decrease within the year after you file this form	?						monthly	y income
10.		No.	•							
		Yes. Explain:								